

**ISSUE SLIP STAPLE AREA (for additional cross references)**

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	R H		5/18
<b>O.I.P.E. CLASSIFIER</b>		49	5/24/01
<b>FORMALITY REVIEW</b>	tha	9466	07/02/01
<b>RESPONSE FORMALITY REVIEW</b>			

## **INDEX OF CLAIMS**

✓ .....	Rejected	N .....	Non-elected
= .....	Allowed	I .....	Interference
— (Through numeral)...	Cancelled	A .....	Appeal
÷ .....	Restricted	O .....	Objected

Claim	Date
Final	
Original	
10	5
2	9
01	02
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
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Claim		Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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